

<b>SCC eFile</b>	<b>2014 ANNUAL REPORT</b> <b>COMMONWEALTH OF VIRGINIA</b> <b>STATE CORPORATION COMMISSION</b>	<b>214519970</b>				
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>1.) CORPORATION NAME:  <b>K&amp;G Men's Company Inc.</b></p> <p>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:  <b>CT CORPORATION SYSTEM</b>  <b>4701 COX ROAD, SUITE 285</b>  <b>GLEN ALLEN, VA</b></p> <p>3.) CITY OR COUNTY OF VA REGISTERED OFFICE:  <b>HENRICO COUNTY</b></p> <p>4.) STATE OR COUNTRY OF INCORPORATION:  <b>DE</b></p> </div> <div style="width: 35%;"> <p>DUE DATE: <b>6/30/2014</b></p> <p>SCC ID NO: <b>F1430794</b></p> <p>5.) STOCK INFORMATION</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>1,000</td> </tr> </table> </div> </div>			CLASS	AUTHORIZED	COMMON	1,000
CLASS	AUTHORIZED					
COMMON	1,000					
<p>6.) PRINCIPAL OFFICE ADDRESS:</p> <p style="text-align: center;">ADDRESS: 1225 CHATTAHOOCHEE AVENUE</p> <p style="text-align: center;">CITY/ST/ZIP: ATLANTA, GA 30318</p>						
<p>7.) DIRECTORS AND PRINCIPAL OFFICERS:      All directors and principal officers must be listed. An individual may be designated as both a director and an officer.</p>						
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: STEVE RICCI  TITLE: PRESIDENT  ADDRESS: 1225 CHATTAHOOCHEE AVE NW  CITY/ST/ZIP/CO: ATLANTA, GA 30318 </td> <td style="width: 5%; text-align: center; vertical-align: middle;"> <input checked="" type="checkbox"/> </td> <td style="width: 40%; text-align: center; vertical-align: middle;"> OFFICER      <input type="checkbox"/> DIRECTOR </td> </tr> </table>			NAME: STEVE RICCI TITLE: PRESIDENT ADDRESS: 1225 CHATTAHOOCHEE AVE NW CITY/ST/ZIP/CO: ATLANTA, GA 30318	<input checked="" type="checkbox"/>	OFFICER <input type="checkbox"/> DIRECTOR	
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NAME:	KIM OWENS	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	6100 STEVENSON BLVD		
CITY/ST/ZIP/CO:	FREMONT, CA 94538		
NAME:	HYON PARK	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	6380 ROGERDALE ROAD		
CITY/ST/ZIP/CO:	HOUSTON, TX 77072		
NAME:	CALLIE PARKER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	1225 CHATTAHOOCHEE AVE. NW		
CITY/ST/ZIP/CO:	ATLANTA, GA 30318		
NAME:	CLAUDIA PRUITT	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP/AT/AS		
ADDRESS:	6380 ROGERDALE ROAD		
CITY/ST/ZIP/CO:	HOUSTON, TX 77072		
NAME:	BRIANNA REGISTER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	1225 CHATTAHOOCHEE AVENUE NW		
CITY/ST/ZIP/CO:	ATLANTA, GA 30318		
NAME:	LAURA ANN SMITH	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP/AS		
ADDRESS:	6380 ROGERDALE ROAD		
CITY/ST/ZIP/CO:	HOUSTON, TX 77072		
NAME:	CAROLE L SOUVENIR	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP/AS		
ADDRESS:	6100 STEVENSON BLVD		
CITY/ST/ZIP/CO:	FREMONT, TX 94538		
NAME:	MATT STRINGER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	6100 STEVENSON BLVD		
CITY/ST/ZIP/CO:	FREMONT, CA 94538		
NAME:	SCOTT WILTSEY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	1225 CHATTAHOOCHEE AVENUE NW		
CITY/ST/ZIP/CO:	ATLANTA, GA 30318		
NAME:	JON W KIMMINS	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	6100 STEVENSON BLVD		
CITY/ST/ZIP/CO:	FREMONT, CA 94538		
NAME:	DOUGLAS S EWERT	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CEO		
ADDRESS:	6100 STEVENSON BLVD		
CITY/ST/ZIP/CO:	FREMONT, CA 94538		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MICHAEL W CONLON SECRETARY 6380 ROGERDALE ROAD HOUSTON, TX 77072	<input checked="checked" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	STEVEN STAES COO 1225 CHATTAHOOCHEE AVENUE NW ATLANTA, GA 30318	<input checked="checked" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.					
/s/ LAURA ANN SMITH		LAURA ANN SMITH, VP/AS		4/18/2014	
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT		PRINTED NAME AND CORPORATE TITLE		DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.					